BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								RD YOR920010007US1					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E		OR	OTHER SMALL	R THAN	
TO	OTAL CLAIMS	<u>;</u>	30	30			ļſ	RATE	FEE	7	RATE	FEE	
FOR			1	NUMBER FILED		BER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	 	
TOTAL CHARGEABLE CLAIMS			30 mi	30 minus 20=		10		X\$ 9=	†	OR	X\$18=	180	
IN	DEPENDENT C	3 m	3 minus 3 =		0		X40=	 	1	X80=	100		
MULTIPLE DEPENDENT CLAIM PI			RESENT	RESENT			 		┼	OR			
• 11	the difference	e in column 1 is	less than z	ero. enter	r "0" in	column 2	L	+135=		OR	+270=		
		CLAIMS AS A						TOTAL		OR	TOTAL	890	
		(Column 1)	(MENDE:	(Colum	mn 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total		Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		=		X40=	<u> </u>	1 1	X80=		
	FIRST PRESE	ENTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		-			OR	·		
				,			L	+135=		OR	+270=		
							Αſ	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS				(Column 3)	·						
NDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
S	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
AME	Independent FIRST PRESE	NTATION OF MU	Minus	PENDENT	C1 A154	=		X40=		OR	X80=		
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
	•									OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ğ	Total	•	Minus	**		=		X\$ 9=	• • • • • • • • • • • • • • • • • • • •	OR	X\$18=		
AME	Independent		Minus	***		=	-	X40=		ŀ	X80=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		\vdash			OR			
* if th entry in column 1 is less than th entry in column 2, write "0" in column 3.										OR	+270=		
"If the "Highest Number Pr viously Paid F r" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											TOTAL DDIT. FEE		
T	he "Highest Num!	ber Previously Paid	I For (Total or	Independ r	nt) is the	high st number	f und	in the app	ropriate box	in colu	ımn 1.		